

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

NECA-IBEW PENSION TRUST FUND, et al.

Case No.: 3:16-cv-01756-YY

Plaintiff(s),

v.

APPLICATION FOR SPECIAL  
ADMISSION – *PRO HAC VICE*

PRECISION CASTPARTS CORP, et al.

Defendant(s).

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**Application for *Pro Hac Vice* Admission and CM/ECF Registration**

Attorney Jacob M. Polakoff requests special admission *pro hac vice* to the Bar of the United States District Court for the District of Oregon in the above-captioned case for the purposes of representing the following party(s):

NECA-IBEW Pension Trust Fund (The Decatur Plan) and ANGELA LOHMAN as trustee

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In support of this application, I certify that: 1) I am an active member in good standing with the Pennsylvania State Bar; and 2) that I have read and am familiar with the Federal Rules of Evidence, the Federal Rules of Civil and Criminal Procedure, the Local Rules of this Court, and this Court's Statement of Professionalism.

I understand that my admission to the Bar of the United States District Court for the District of Oregon is solely for the purpose of litigating in the above matter and will be terminated upon the conclusion of the matter.

**(1) PERSONAL DATA:**

Name: Polakoff Jacob M  
(Last Name) (First Name) (MI) (Suffix)

Agency/firm affiliation: BERGER MONTAGUE PC

Mailing address: 1818 Market Street, Suite 3600

City: Philadelphia State: PA Zip: 19103

Phone number: (215) 875-5816 Fax number: (215) 875-4604

Business e-mail address: jpolakoff@bm.net

**(2) BAR ADMISSION INFORMATION:**

(a) State bar admission(s), date(s) of admission, and bar number(s):  
Supreme Court of PA, Active November 3, 2006 (ID #204124)

Supreme Court of New Jersey, Active December 2006 (ID # 035832006)

(b) Other federal court admission(s) and date(s) of admission:  
USDC Eastern District of Pennsylvania Active January 2010

US Western District of New York Active January 3, 2018

**(3) CERTIFICATION OF DISCIPLINARY ACTIONS:**

- I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association.
- I am now or have been subject to disciplinary action by a state or federal bar association. (See attached letter of explanation.)

**(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:**

Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.

**(5) CM/ECF REGISTRATION:**

I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.

**Certification of Attorney Seeking *Pro Hac Vice* Admission:** I have read and understand the requirements of LR 83-3, and I certify that the above information is true and correct.

DATED: 08/21/2018.



(Signature)

**REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:**

LR 83-3(a)(1) requires applicants for *pro hac vice* admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1.

To request a waiver of the requirement to associate with local counsel under LR 45-1, check the following box:

- I seek admission for the limited purpose of filing a motion related to a subpoena that this Court did not issue. Pursuant to LR 45-1(b), I request a waiver of the LR 83-3(a)(1) requirement to associate with local counsel and therefore do not include a certification from local counsel with this application.

To associate with local counsel, complete the following section and obtain the signature of local counsel.

Name: <u>Dahab</u>	<i>(Last Name)</i>	Nadia	<i>(First Name)</i>	H.	<i>(MI)</i>	<i>(Suffix)</i>
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OSB number: 125630

Agency/firm affiliation: Stoll Stoll Berne Lokting & Shlachter P.C.

Mailing address: 209 SW Oak Street, Suite 500

City: Portland State: OR Zip: 97204

Phone number: 503-227-1600 Fax number: 503-227-6840

Business e-mail address: ndahab@stollberne.com

**CERTIFICATION OF ASSOCIATE LOCAL COUNSEL:**

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in case number 3:16-cv-01756-YY.

DATED: August 22, 2018.

s/Nadia H. Dahab  
*(Signature of Local Counsel)*

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**COURT ACTION**

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Application for *pro hac vice* admission by Jacob M. Polakoff in case number:  
3:16-cv-01756-YY is hereby:

- Approved subject to payment of fees.
- Denied.

DATED: \_\_\_\_\_.

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Judge